

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000033505

**Entity Name:** ACP BUSINESS SOLUTIONS LLC

**Current Principal Place of Business:**

3314 ROBERT TRENT JONES DR APT 406  
ORLANDO, FL 32835

**Current Mailing Address:**

3314 ROBERT TRENT JONES DR APT 406  
ORLANDO, FL 32835

**FEI Number:** 47-3237944

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

POLZIN, ALDO  
3314 ROBERT TRENT JONES DR  
APT. 406  
ORLANDO, FL 32835 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	MGR
Name	POLZIN, ALDO	Name	POLZIN, CHRISTINA
Address	3314 ROBERT TRENT JONES DR, APT. 406	Address	3314 ROBERT TRENT JONES DR, APT. 406
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALDO POLZIN

MR

05/01/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date